

## Alex Corser, Penn Clinic

I have been using telehealth since I closed my practice due to the COVID-19 pandemic. Before this, I had always incorporated advice and home exercise prescriptions into my face-to-face work, so the transition didn't feel too much of a leap initially. However, I hadn't considered using Telehealth for my paediatric patient population, which is roughly one-third of my usual clinical practice, due to the increased complexity of this particular patient type.

### Demand for paediatric enquiries

After I closed the clinic, I quickly became aware of the demand and a certain level of urgency for paediatric enquiries – if a child isn't sleeping well or is not feeding well then this can start to have quite large ramifications very quickly. The way I have adapted this for Telehealth is by having a case history style "questionnaire" that the parents fill in before arranging the consultation. This gives me the ability to keep the consultations focused on their concerns. It also serves as a health screen to ensure that the child is healthy and thriving and that there is no need to refer the child to their GP. The appointments thus are a little briefer which can be valuable when treating the small ones!

From this initial questionnaire, I then discuss anything that needs clarification with the child's parents and observe the child through an online video call. Sometimes instructing the parent to play in a certain way or to show me a specific movement. From this, I can formulate accurate advice for the parents to follow, prescribe exercises or management strategies for managing at home, as well as reassure that there is nothing more serious going on.

I follow this up with an email summarising the call and my instructions which I adapt to form the basis of my notes. I tend to follow up 5-7 days later.

The response has been brilliant – fantastic! Parents have been so grateful for strategies that they can implement at home rather than wait until services are re-opening. I have noticed very similar outcomes to my hands-on paediatric appointments – potentially the changes take a little longer to achieve but the overall outcomes are similar.

### Confident parents

A huge unforeseen benefit in switching to this format has been the confidence shift I see in parents. By managing to help their children themselves their confidence soars and the family dynamic switches massively. I can almost see their shoulders drop and their foreheads relax in front of my eyes during the consultation. This is superior to my hands-on work, even with careful management, parents perceive my intervention to be the help and this trust in their abilities and how they can help their child themselves isn't as easy to achieve.

### Long-term benefits and timely treatment

I can see huge long-term benefits in using telehealth once social distancing measures are relaxed, especially in the paediatric population. Parents often find it difficult to attend an appointment in person, whether that is due to a c-section meaning they cannot drive or just difficulties in getting themselves out of the house for a scheduled appointment.

telehealth negates this barrier and allows parents to begin the process of managing their child's complaint with no delay.

### Advice for osteopaths in paediatrics

As anyone established in paediatrics knows, young babies and children are a difficult population group to assess and manage. Safety has to be considered with the utmost importance. Have strategies in place for how you can negate the risk:

- Use a pre-appointment questionnaire to assess milestones and the child's health to date extremely thoroughly. It takes roughly 15-20 minutes for parents to fill out and allows me to screen carefully and assess what management is likely to be appropriate.
- Consider strategies for how to assess online – it's very similar to how I would assess in the clinic if it is with older babies or children but the parents are playing with the child and I am observing them through the video call. Experiment and trust that your words and advice are extremely powerful and beneficial and that there is a lot you can offer without hands-on treatment.

### Telehealth as a permanent additional

#### service

I still feel that face to face appointments offer the ability to assess initially in more detail than online, however, following this period of enforced distancing I plan to offer telehealth appointments for monitoring outcomes, progressing or regressing home exercise programmes and also for my elderly patient population that at times find a barrier to an appointment can be travel costs or even poor weather.



Alex Corser

Alex is clinic director of the Penn Clinic, a renowned osteopathy practice in Hertfordshire, which specialises in complex cases and paediatrics. She lectures at the London School of Osteopathy, delivering lectures to masters' students to prepare them for their final exams. She is also a founding member of Educate and Advocate Training, a post graduate CPD company providing training for health-care professionals to provide consistent, evidence-based practice.

www.pennclinic.co.uk



@alex\_the\_osteopath

## Getting started with telehealth

With the foreseeable future requiring us to adapt to different ways of working, telehealth is fast becoming the 'new-normal'. Here are some tips to consider incorporating into your telehealth practice.

### Define and plan

- Define a plan for telehealth services, how you will use it, with whom and how you will offer this service alongside your other services.
- First and foremost, ensure that the osteopathic telehealth service is tailored to the patients best interest.
- If working with a team consult and advise all members of the team on the strategy and value of telehealth within your service.

### Develop the service

- Consider use for high-risk or older patients to offer your support and services whilst in isolation.
- Consider its use for follow-ups to determine outcomes of treatment and if further face to face consultation is required.
- Adjustable appointment times. You can shorten or lengthen your appointment times and slots to reflect the nature of the consultation.
- Assess a charging structure for your telehealth service that reflect the time and level of service you are providing.

### Ensure safety and compliance

- Ensure you have clear approach to consider and document areas such as data sharing, informed consent and confidentiality issues.
- Check the telehealth services provided are appropriately insured.

### Technology and equipment

- Consider what platforms you will use, what equipment may be needed and if you need any technical support or training.
- Trial different technologies and systems until you find a strategy that works for you.
- Use high-quality connection, where possible. Research shows that if the technical connection is high quality, clinicians and patients tend to communicate by video in much the same way as in an in-person consultation<sup>(1)</sup>.

### Communicate and promote

- Communicate and promote the value of your telehealth services with staff and your patients, along with your other services.
- Talk the patient through the first video consultation. Support the patient through their first consultation by giving them a call to talk them through connecting and setting up the consultation.
- Follow up. Contact patients after the consultation and/or in between appointments to see how they are progressing.

### Monitor and evaluate

- Monitor and regularly evaluate your osteopathic telehealth services to ensure best practice and patient value.



A guide to using telephone and video consultations in osteopathic practice is available from [osteopathy.org/!o-guide-to-conducting-tele-video-consultations.pdf](http://osteopathy.org/!o-guide-to-conducting-tele-video-consultations.pdf).

(1) Seuren LM, Wherton J, Greenhalgh T, Cameron D, Accurt C, Shaw SE. Physical examinations via video for patients with heart failure: qualitative study using conversation analysis. *J Med Internet Res* 2022;24:e6694. doi:10.2196/6694

